

Submit 3 Copies To Appropriate District
 Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 811 South First, Artesia, NM 87210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-045-21906
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

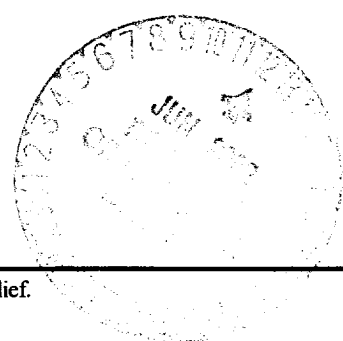
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	7. Lease Name or Unit Agreement Name: San Juan 32-7 Unit 009260
2. Name of Operator Phillips Petroleum Company 017654	8. Well No. SJ 32-7 Unit #30
3. Address of Operator 5525 Highway 64, NBU 3004, Farmington, NM 87401	9. Pool name or Wildcat Blanco Mesaverde 72319
4. Well Location Unit Letter <u>B</u> : <u>810'</u> feet from the <u>North</u> line and <u>1560'</u> feet from the <u>East</u> line Section <u>21</u> Township <u>32N</u> Range <u>7W</u> NMPM County <u>San Juan</u>	
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: C/O fill & reran tubing <input checked="" type="checkbox"/>	
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12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

5/24/02 MIRU Key #40. Set BPV in WH. NDWH & NU BOP. PT-OK. COOH w/2-3/8" tbg. RIH w/tubing and C/O 22' of fill. COOH w/tubing. RIH w/2-3/8", 4.7# tubing and set @ 5706' w/"F" nipple set @ 5700'. ND BOP, NU WH. Pumped off exp. check. RD & released rig 5/29/02. Returned well to production.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.
 SIGNATURE Patsy Clugston TITLE Sr. Regulatory/Proration Clerk DATE 6/7/02
 Type or print name Patsy Clugston Telephone No. 505-599-3454

(This space for State use)
 APPROVED BY _____ TITLE _____ DATE JUN 12 2002
 Conditions of approval, if any: